



## SUBURBAN TEMPLE-KOL AMI

**Open Doors Philanthropic Support for FY 2018-2019**

Please use this form to declare your **membership contribution** for the coming year. We have calculated the FY18-19 sustaining amount at **\$2,575 – the figure per household that needs to be raised to pay for temple operations.** We ask that your best possible gift in an amount that is reasonable and right for you. If you can contribute more, your gift will be used to help others for whom this is not possible. Your support contributes to our spiritual and fiscal strength in the year ahead.

**Note: If you intend to make a donor advised fund/philanthropic fund recommendation to support ST-KA, please do NOT fill out the form. Please notify Brett Shankman of the amount of your fund recommendation.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

**Open Doors Contribution**

\_\_\_ Double Sustaining Amount \$ 5,150  
 \_\_\_ Sustaining Amount \$ 2,575  
 \_\_\_ Other: \$ \_\_\_\_\_

I wish to make a single gift this year including the **annual campaign, Kol Nashim (\$54), and/or ARZA (\$50).**

Please have Brett contact me at the above phone number to discuss. The best time(s) to reach me is: **Mon (AM/PM) | Tues (AM/PM) | Wed (AM/PM) | Thurs (AM/PM) | Fri (AM/PM)**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Payment/Billing Schedule**

\_\_\_ My gift is enclosed.

Please bill me: \_\_\_ monthly \_\_\_ quarterly (July, October, February, May) \_\_\_ other \_\_\_\_\_

Charge my: Mastercard, Visa, AMEX, Discover, or Visa (circle one).

\_\_\_ I agree to a convenience fee of 3% to help minimize Temple expenses.

Name as it appears on your credit card: \_\_\_\_\_

Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return to Suburban Temple-Kol Ami. Contact Brett Shankman, executive director with any questions (216.991.0700 or bshankman@suburbantemple.org).**